

BEST AVAILABLE COPY

Index of Claims		Application No.		Applicant(s)	
		09/781,419		OOE ET AL.	
		Examiner		Art Unit	
		Samuel M Heinrich		1725	
<input checked="" type="checkbox"/> Rejected <input type="checkbox"/> = Allowed		<input type="checkbox"/> - (Through numeral) <input type="checkbox"/> + Cancelled <input type="checkbox"/> Restricted		<input type="checkbox"/> N Non-Elected <input type="checkbox"/> I Interference <input type="checkbox"/> A Appeal <input type="checkbox"/> O Objected	
Claim	Date	Claim	Date	Claim	Date
Final	Original	Final	Original	Final	Original
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3	0	53		103	
4	0	54		104	
5	0	55		105	
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50		100		150	